PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

		CLAIMS AS	S FILED - (Column					SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					(Column 2)					OR 1			
			24					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMB	BER EXTRA		ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			Э У minus 20= 1		• 4			X\$ 9=	36	OR	X\$18=		
INDEPENDENT CLAIMS			U minus 3 =					X40=	40	OR	X80=		
MU	ILTIPLE DEPEN	IDENT CLAIM P	REŚENT					+135=	10	OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				_	TOTAL	U31	OR	TOTAL		
	С	LAIMS AS A	MENDED	ENDED - PART II						•	OTHER	THAN	
		(Column 1)				(Column 3)	SMALL ENTITY			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus *** JLTIPLE DEPENDENT		CL AINA	=		X40=		OR	X80=		
<u>. </u>	FIRST PRESE	INTATION OF MI	ULTIPLE DEF	ENDENT	CLAIM		ſ	+135=		OR	+270=		
								TOTAL		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)	AL	DDIT. FEE			ADDII. FEEI		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO	ST ER JSLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			On			
							L	+135=		OR	+270=		
							ΑE	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X40=			X80=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		l ├			OR			
	1611		h		40" i	l 0		+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
•••		ımber Previously F nber Previously Pa							oropriate bo	x in co	lumn 1.		